



Grove City Planning Commission

METHOD OF REZONING APPLICATION

Please provide the requested information and submit to:

DEVELOPMENT DEPARTMENT 4035 BROADWAY GROVE CITY, OHIO 43123 614-277-3004

MAR 01 2016

grovecityohio.gov/development

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TYPE OF REQUEST	المستقدية المرابي	1100			
Standard Rezoning	X PUD Rezoning		Zoning Upon Annexation	Use Approval	
PROJECT / PROPERTY	INFORMATION				
PROJECT NAME: The Pinns	acle Club				
PROJECT LOCATION: Interse	ection of Night Hawk				
PARCEL ID NUMBER: 04000922600			ACREAGE AFFECTED BY THIS APPLICATION: 2.0		
EXISTING ZONING: PUD- Residential			EXISTING LAND USE: Undeveloped		
PROPOSED ZONING: PUD- Residential			PROPOSED LAND USE: Single Family		
		PROPUSED L	AND USE: Cirigio I arriny		
PROPERTY OWNER IN					
Note: Property ownership information M/I Homes of Central C	is to reflect how the property is h hio 3 Easton 0	eld in accordance wit Oval, Suite 54	h the Franklin County Auditor's Office. Columbus, OH 432	19	
Name	Address		City, State. Zip		
614-418-8023 Phone	614-418-8	49 9	ifrancis@mihomes.c	om	
Phone	Fax	-	Email		
APPLICANT INFORMAT	ION				
Note: The applicant is the person(s) or e Jason Francis	entity seeking approval of this application of	ation. Land Develo	pment M/I Homes of Central	Ohio	
Name	Title		Company / Organization		
3 Easton Oval, Suite 54	10 Columbus		OH 43219		
Address	City		Slate, Zip		
614-418-8023 Phone	<u>614-418-8</u>	<u>499 </u>	<u>jfrancis@mihomes.c</u>	om	
Phone	Fax		Email		
AUTHORIZED REPRESE		100	THE RESERVE OF THE PARTY OF THE		
Note: The authorized representative is t and make commitments on behalf of the and related parties.	the person(s) or entity representing to applicant. The City does not take	the applicant. As the a any responsibility for t	authorized representative you have the proper authorit he lack of communication between the authorized rep	ty to speak, represent presentative, applicant	
Tim Voichko	Project M	anager	Civil & Environmental Co	nsultants. Inc	
Name	Title		Company / Organization		
250 Old Wilson Bridge	Road, Suite 250 V	Vorthington	OH 43085		
Address	City		State, Zip		
614-310-0178	614-5 <u>40-6</u>	638	tvolchko@cecinc.con	n	
Phone Engineer	Fax		Email		
Relationship to the Applicant (e.g. le	egal counsel, engineer, architec	t, land planner, con	tractor, etc.)		
SUBMITTAL REQUIREM					
		the application subm	ittal to be considered complete. The submittal shall	Linglanda the exercise of	
number of copies (properly folded and co all required checklist items contained wit	ollated) and contain all required supp	plementary documenta	ttion. Submitted materials shall be accurate, measura	ble and shall address	
	Fee Calculation		Submittal Items	(check box)	
Application Fee:	\$ 100.00	Com	pleted Application (signed and notarized):		
		Subn	nittal Fee:	0	
		Ten (10) Copies of Plans (folded and collated):		

Revised 11/15

PROPERTY OWNER AUTHORIZATION OF APPLICANT SUBMITTAL AND SITE VISIT(S)
JASON Francis - MIT Homes, the current property owner hereby authorize the oplicant CIVI 4 Environmental Consultants CEGo submit this application. I agree to bound by all representations and agreements made by the applicant and/or their authorized representative.
dditionally, as the current property owner, knowing that site visits to the property may be necessary, I hereby authorize
gnature of Current Property Owner: Date: Date:
TATE OF OHIO, COUNTY OF FRANKLIN
ne above individual(s), being first duly swom, deposes on oath and says that he/she has read the foregoing fidavit subscribed by him/her, knows the contents thereof, and that the statements therein are true.
DARLENE W. SMITH NOTARY PUBLIC, STATE OF OHIO MY COMMISSION EXPIRES JUNE 25, 2019
APPLICANT'S / AUTHORIZED REPRESENTATIVE SAFETAVIT JASON FRANCIS - M IT HOMES , the applicant or authorized representative
ve read and understand the contents of this application. The information contained in this application, attached exhibits
d other information submitted is complete and in all respects true and correct, to the best of my knowledge and belief.
gnature of Applicant or Authorized Representative: Date: Date:
TATE OF OHIO, COUNTY OF FRANKLIN
e above individual(s), being first duly sworn, deposes on oath and says that he/she has read the foregoing idavit subscribed by him/her, knows the contents thereof, and that the statements therein are true.
day of 11 Christof Land Signature of Notary Public DARLENE W. SMITH NOTARY PUBLIC, STATE OF OHIO MY COMMISSION EXPIRES JUNE 25, 2019
PAYMENT AMOUNT
RECEIVED: 3/1/16 RECEIVED BY: PAYMENT AMOUNT: \$\frac{\psi}{100.00}\$
PAYMENT AMOUNT: # 100.00 ITATIVE PC MEETING DATE: A 5 1 0 DIECT ID NUMBER: DIECT ID NUMBER:
201603010013



PETITION TO CHANGE THE ZONING MAP OF THE CITY OF GROVE CITY

We, the undersigned, hereby request the rezoning of the following described property and petition for changing the Grove City Zoning map:

LOCATION OF PROPERTY Intersection of Night Hawk Drive & English Turn Way				
EXISTING ZONING PUD- Residentia	PROPOSED ZONING PUD- Residential			
PETITIONER NAME (PLEASE PRINT)	Jason Francis			
PETITIONER'S SIGNATURE	gr 7m			
OWNER NAME (PLEASE PRINT)	Jason Francis- M/I Homes of Central Ohio			
OWNER'S SIGNATURE	Ja Jun			
DATE	2129/16			